

not RCRA

5E0401 - A0403

US EPA RECORDS CENTER REGION 5



486467

NFA - YGW
9/3/87

D.2

8/18/87

SITE DESCRIPTION/EXECUTIVE SUMMARY

Site Name and Location

McGraw Edison Serv
32471 Industrial
Madison Heights, MI 48071

County: Oakland
Michigan Code Number: 63-01N-11E-01AC
DNR District: Detroit
EPA ID Number: MID 980609432

SAS Score/Screen No.:

This site was reported to the EPA on a "Notification of Hazardous Waste Site" dated 06/01/81. The only storage that occurred on the site was holding of transformer waste oil with PCB's in above ground tanks and drums until a special carrier hauled it out of state for disposal. There are no known, suspected, or likely releases to the environment attributed to this site, and the Detroit district DNR files have no reports of any problems. No complaints have been filed with the City of Madison Heights or Oakland County Health Department regarding this site.

National Electric Coil Division of McGraw Edison Service is now known as MagneTek National Electric Coil, and has discontinued operations at the site. The property was sold on 7/19/84, and the building and grounds have been renovated for the new owner, Theodore Wahl, of Walco Press Repair Inc., according to the City of Madison Heights building department.

There is no evidence to show that any hazardous waste was ever released at this location.

Recommendation to EPA

This site receives a no further action priority for inspection, as there is no indication that any hazardous wastes were released at the site.

RECEIVED

AUG 26 1987

Program
Support Section

Date of Previous Summary:
Previous Author:

Current Date: 8/18/87
Author: D. Courtney

Site Assessment Unit
Environmental Response Division
Michigan Dept. of Natural Resources

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POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
26 980609432

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) MCGRAW EDISON SERVICE		02 STREET ROUTE NO. OR SPECIFIC LOCATION IDENTIFIER 32471 INDUSTRIAL			
03 CITY MADISON HEIGHTS		04 STATE MI	05 ZIP CODE 48071	06 COUNTY OAKLAND	
08 COORDINATES LATITUDE 42°31'50"		LONGITUDE 83°5'30"		07 COUNTY CODE 125	08 CONG DIST 18
10 DIRECTIONS TO SITE (Starting from nearest public road) FROM I-75 TAKE 14 MILE ROAD EAST 1 3/4 MILES TO INDUSTRIAL DRIVE. TURN RIGHT (SOUTH) ON INDUSTRIAL - SITE IS ON RIGHT HAND SIDE. NOW KNOWN AS "WALCO PRESS REPAIR, INC."					

III. RESPONSIBLE PARTIES

01 OWNER (if known) MAGNETEK NATIONAL ELECTRIC COIL		02 STREET (Business, mailing, residential) 941 CHATHAM LN, P.O. BOX 21396			
03 CITY COLUMBUS		04 STATE OH	05 ZIP CODE 43221	06 TELEPHONE NUMBER (614) 459-1200	
07 OPERATOR (if known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: _____ <input checked="" type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103(a)) DATE RECEIVED: 06/01/81 <input type="checkbox"/> C. NONE					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input type="checkbox"/> YES DATE _____ <input checked="" type="checkbox"/> NO DATE _____		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION 1976 1984 BEGINNING YEAR ENDING YEAR <input type="checkbox"/> UNKNOWN			

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

PCBs were taken from the site by special carrier and transported to out-of-state disposal sites.

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

No apparent hazard to environment or population.

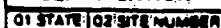
V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one: if high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Residents) <input type="checkbox"/> A. HIGH (Inspection required immediately) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspection on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current inspection form)			
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VI. INFORMATION AVAILABLE FROM

01 CONTACT BUILDING DEPARTMENT		02 OF (Agency/ Organization) CITY OF MADISON HEIGHTS		03 TELEPHONE NUMBER (33) 588-1200	
04 PERSON RESPONSIBLE FOR ASSESSMENT D. COURTNEY / S. CUNNINGHAM		05 AGENCY MDNR	06 ORGANIZATION ENV. RESPONSE	07 TELEPHONE NUMBER (517) 373-4800	08 DATE 08/18/87

#00269 NB



.. A TOXIC	E SOLUBLE	I HIGHLY VOLATILE
.. B CORROSIVE	- F INFECTIOUS	J EXPLOSIVE
.. C RADIOACTIVE	- G FLAMMABLE	K REACTIVE
D PERSISTENT	H IGNITABLE	L INCOMPATIBLE
		M NOT APPLICABLE

VI. SOURCES OF INFORMATION: (Can include sources, e.g., news, etc., and other sources, etc.)



**POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3- DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS**

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS *Continued*

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION:

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION: *(Include number of species)*

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION:

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, seepage, usually resulting from leaks)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

04 NARRATIVE DESCRIPTION:

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION:

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION:

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ P. ILLEGAL UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION:

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

05. DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION *Cite sources: monitoring, etc. or monitoring system operator, resident*

ECOLOGY AND ENVIRONMENT INC. (7/85)